

United States Environmental Protection Agency	POTENTIAL HAZARDOUS WASTE SITE SITE IDENTIFICATION ("DISCOVERY")				I. IDENTIFICATION	
					01 ST	02 SITE NUMBER
	DC	DCD981039530				
II. SITE NAME AND LOCATION						
01 SITE NAME (Legal, common, or descriptive name of site)				02 STREET, ROUTE NUMBER, OR SPECIFIC LOCATION IDENTIFIER		
Belair Cleaners				6211 Georgia Ave., NW		
03 CITY		04 ST	05 ZIP CODE	06 COUNTY	07 CO CODE	08 CONG DIST
Washington		DC	20011			
09 DIRECTIONS TO SITE (Starting from nearest public road; enter up to 4 lines of text)						
THE SITE IS LOCATED ON GEORGIA AVE., A MAJOR NORTH-SOUTH THOROUGHFARE. IT IS ON THE CORNER OF GEORGIA AVE. AND RITTENHOUSE ST, NW, APPROXIMATELY 3.6 MILES SOUTH OF THE GEORGIA AVE. EXIT FROM RTE 495 (BELTWAY). SEE ATTACHED MAP						
III. RESPONSIBLE PARTIES						
01 OWNER (If known)			02 STREET (Business, residential, mailing)			
Doi V Nguyen			6211 Georgia Ave., NW			
03 CITY		04 ST	05 ZIP CODE	06 TELEPHONE NUMBER		
Washington		DC	20011	202-291-8529		
07 OPERATOR (If known and different from owner)			08 STREET (Business, residential, mailing)			
Doi V Nguyen						
09 CITY		10 ST	11 ZIP CODE	12 TELEPHONE NUMBER		
Washington		DC	20011	202-291-8529		
13 TYPE OF OWNERSHIP (Mark one; use "insert" mode)						
<input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL (Agency name): _____ <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER (Specify): _____ <input type="checkbox"/> G. UNKNOWN						
IV. HOW IDENTIFIED						
01 DATE IDENTIFIED		02 IDENTIFIED BY (Mark all that apply; use "insert" mode)				
4/07		<input type="checkbox"/> A. CITIZEN COMPLAINT <input type="checkbox"/> B. INDUSTRY <input checked="" type="checkbox"/> C. STATE/LOCAL GOVERNMENT <input type="checkbox"/> D. AERIAL RECONNAISSANCE <input type="checkbox"/> E. RCRA INSPECTION <input type="checkbox"/> F. SURFACE IMPOUNDMENT ASSESSMENT <input type="checkbox"/> G. OTHER EPA IDENTIFICATION <input type="checkbox"/> H. OTHER (Specify): _____				
(Month/Day/Year)						
V. SITE CHARACTERIZATION						
01 TYPE OF SITE (Mark all that apply; use "insert" mode)						
<input type="checkbox"/> A. STORAGE <input type="checkbox"/> B. TREATMENT <input type="checkbox"/> C. DISPOSAL <input type="checkbox"/> D. UNAUTHORIZED DUMPING <input checked="" type="checkbox"/> E. OTHER (Specify): _____						
02 SUMMARY OF KNOWN PROBLEMS (Provide narrative description; enter up to 6 lines of text)						
Located close to operating day care center. There is the possibility of contamination of indoor air due to past releases. <u>The site is registered under AIRS and RCRA (Conditionally Exempt Generator).</u>						
03 SUMMARY OF ALLEGED OR POTENTIAL PROBLEMS (Provide narrative description; enter up to 5 lines of text)						
Located close to operating day care center. There is the possibility of contamination of indoor air due to past releases. The site is registered under AIRS and RCRA (Conditionally Exempt Generator).						
VI. INFORMATION AVAILABLE FROM						
01 CONTACT		02 OF (Agency/Organization)		03 TELEPHONE NUMBER		
James Sweeney		DDOE, Land Remediation and Development Branch		202-535-2289		
04 PREPARED BY		05 AGENCY	06 ORGANIZATION	07 TELEPHONE NUMBR	08 DATE (Month/Day/Year)	
Same as Contact					3/7/12	